

****To be completed by Coach at the Conclusion of visit****

Prospect Name: _____ **Sport:** _____

Address: _____ **City/State/Zip:** _____

DATE/TIME VIST BEGAN: ___/___/___ :___ AM / PM

DATE/TIME VISIT ENDED: ___/___/___ :___ AM / PM

Student-Athlete Host Name: _____ Did host receive money? YES NO

Transportation to Campus:

- Air.....Time flight arrived Miami: _____ Time flight departed Miami: _____
Who transported prospect FROM airport: _____ TO airport: _____
- Automobile
- Other (If direct billed, please describe): _____

Lodging:

- ON CAMPUSLocation: _____ Dates: _____
- OFF CAMPUS.....Location: _____ Dates: _____

Accompanied by Others: YES NO

<i>Name:</i>	<i>Relationship to Prospect:</i>
_____	_____
_____	_____
_____	_____
_____	_____

Coaches/Athletic Department Personnel who met with prospect:

<i>Name</i>	<i>Title</i>	<i>Date</i>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Non-Athletic Department Personnel who met with prospect:

<i>Name</i>	<i>Title</i>	<i>Date</i>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Entertainment:

Other than comp. admissions to athletics events, did the individual(s) who accompanied the prospect receive entertainment (i.e. concert, band, movie, etc.)? YES NO

****Please list all entertainment that occurred during the official visit ****

DATE	ACTIVITY	LOCATION	PERSONS	COST
				\$
				\$

MEALS: (If needed, attach a typed breakdown of meal attendees and all meals denoted must be accompanied by an itemized receipt for large official visit parties. You must denote cost/location below of all meals.)

DAY 1: COST: LOCATION: PERSONS AT MEAL:

(B'fast)	\$		
(Lunch)	\$		
(Dinner)	\$		
(Snack)	\$		

DAY 2: COST: LOCATION: PERSONS AT MEAL:

(B'fast)	\$		
(Lunch)	\$		
(Dinner)	\$		
(Snack)	\$		

DAY 3: COST: LOCATION: PERSONS AT MEAL:

(B'fast)	\$		
(Lunch)	\$		
(Dinner)	\$		
(Snack)	\$		

COMPLIMENTARY ADMISSIONS:

Were complimentary admissions provided during the official visit? YES NO

If yes, what event were the admissions for? _____

By signing below, I confirm that the information provided regarding this official visit is accurate and correct. I acknowledge that all NCAA rules were followed during the official visit, and no inducements or impermissible benefits were provided during the duration of the official visit.

Signature of Coach:	Date:
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